MAY 10 2018

New Officer or Employee Employing Office:	K	Name: Jan Garbett	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	
Staff Filer Type (If Applicable): Shared Principal Assistant to Feriod Covered: January 1, 2017	New Member of or Candidate for State:	Daytime Telephon	RESENTATIVES For New Members, Candidates, and New Employees	
Period Covered: January 1, <u>2017</u> A \$200 penalty shall be assessed sgainst sny to <u>1000</u> (o ₁ 2018). individual who files more than 30 days late.	(Office Use Only)	OFFICE OF THE CLUMN	LEGISLATIVE RESOURCE CENTER	Dana tof

PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

ATTACH THE CORRESPONDING SCHEDULE IF YOU ARE I	D. Did you, your spouse, or your dependent child have any reportable Yes No liability (more then \$10,000) at any point during the reporting period?	C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes No Peporting period?	A. Did you, your spouse, or your dependent child: a. Own eny reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?
HEDULE IF YOU ANSWER "YES" THAT YOU ARE REQUIRED TO COMPLETE	J. Did you receive compensation of more than \$5,000 from a Yes No No	F. Did you have any reportable egreement or arrengement with an outside entity during the reporting period or in the current calendar Yes No X	E. Did you hold any reporteble positions during the reporting period or in the current calendar year up through the date of filing?

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

Yes No X	EXEMPTION – Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet ell three tests for exemption? Do not enswer "yes" unless you have first consulted with the Committee on Ethics.
Yes No X	TRUSTS - Details regarding "Qualified Blind Trusts" epproved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

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Tenor Corp	Gad Way Investment	Addenbook Hählards	Carbett Mng.		Examples: Simon & Schuster	Mega Corp Stock	EIF	If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyona (JT), in the optional column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	If you report a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.	Exclude: Your personel residence, including second homes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	For an ownership interest in a privately-hald business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental and other real property held for investment, provide a complete addresa or daecription, e.g., rental property," and a city and state.	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total la ovai \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each assat held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	Identify (a) aach asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period. and (b) any other reportable asset or source of income which generated more then \$200 in "unaamed" income during the year.	Assets and/or income Sources	BLOCK A
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×]	>	<	\$50,001-\$100,000					ITT	1	laset 18ve	saet a ethod usec duni	Value	
								\$100,001-\$250,000					71		no in	at do	いと	₽
				×				\$250,001-\$500,000					ର		*Column M is for assets held by your spouse or dependent child in which you have no intarest.	Indicate velue of asset at close of the reporting period. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold during the reporting period and is included only because it generated income, the value ahould be "Nona."	Value of Asset	BLOCK B
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								Spouse/DC Asset over	\$1,000,000*				13					
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					T			CAPITAL GAINS							None" if the asset gene during the reporting period.	de la constant	Type of Incoma	BLOCK C
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マリ	工工	740	PHI	Partnership	Royalties			Other Type of Income (Specify: e.g.,	Partnership Income	or Farm Income	9)			None if the asset generated no income during the reporting period.	Check all columns that apply. For accounts that generale tax-deferred income (such as 401(k), IRA, or 529 accounts), you may check the "tax-Deferred" column. Dividends, interest, and capital gains, even if interest, and capital gains, even if neinvested, must be disclosed as income for access bodd in taxable accounts.		
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	×							\$201-\$1,000					*			ndice gain None None		
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Name:

Jan Garbett

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	None	\$1-\$1.00	\$1,001-\$	\$15,001	\$50,001	\$100,00	\$250,00	\$500,00	\$1,000,0	\$5,000.0	\$25,000,	Over \$50	Spouse/	NONE	DIVIDEN		RENT:	INTERE	CAPITA	EXCEPT	TAX-DE	770.01	Other Ty Partners	None \$1-\$200	\$201-\$1	\$1,001-\$	\$2,591.1	\$5,001-\$	\$15,001	\$50,001	\$100,00		Over \$5,			None:	\$1-\$200	\$201-\$1,	\$1,001-\$	\$2,501.1	\$5,001-\$	\$15,001	\$50,001-	-			Over \$5,
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Assets and/or income Sources Assets and/or income Sources As of RC 31, 2017 Terenteer Dex X	SCHEDULE A – ASSETS & "UNEARNED INCOME"	& "UNEARNED INC	OME"	Name:	Jan Garbet
Name					+
Cabb	Assets and/or income Sources	Value of Asaet		Type of Income	
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Terms None St. 1000 St. 1001-515,000 St.		8 C D E F G H	7 × [r		1
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ASSET NAME ASSET		1-\$1,000 11,001-\$15,000 15,001-\$50,000 50,001-\$100,000 100,001-\$280,000 250,001-\$500,000	5,000,601-\$25,000,000 25,000,001-\$50,000,000 ver \$50,000,000 pouse/DC Asset over \$1,000,000*	NTEREST APITAL GAINS XCEPTED/BLIND TRUST AX-DEFERRED	ther Type of Income (Specify: e.g., artnership Income or Farm Income)
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Use additional sheets if more space is required.

SCHEDULE C - EARNED INCOME

Name:	
Jan	
Garbett	
Page 5 of 6	
	Name: Jan Garbett Page 5 of 6

List the source, type, and emount of earned income from any source (other then the filer's current employment by the U.S. government) totaling \$200 or more end filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below. **EXCLUDE**: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

Members and emplo professional services	INCOME LIMITS and PROHIBITED INCOME: Be advised thet the income limit and prohibited income may apply to you after you are on House payroll. The 2017 limit on outside eamed income for Members and employees compenseted at or above the "senior staff" rate wes \$27,765. The 2018 limit is \$28,050. In addition, certain types of income (notably honoraria, director's fees, end payments for professional services involving a fiduciery relationship) ere totally prohibited for Members end senior staff.	ited income may apply to you after you 2018 limit is \$28,050. In addition, cert senior staff.	u are on House payroll. The 2017 sin types of income (notably honoral	7 limit on outside eamed income for na, director's fees, end payments for
0	the first ide date of receipt for becoming	1		Amount
<u> </u>	Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Yeer
	ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples:	Salte or Marylania Civil War Roundshle (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$20,000 \$0 N/A	\$1,000 N/A
Baissas	Barron (somes) posmal lacama	Spains Salary		00000

SCHEDULE D - LIABILITIES

Name: Jan Garbett	Page 6 of 6
If the reporting pariod by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting	nt owad during tha reporting
ed by real property including mortgagas on their personal residanca. Excluda: Any mortgage on your personal rasidence	ge on your personal rasidence
ɪsahold furniture, or appliances; liabilitias of a businass in which you own an interest (unlass you ara parsonally liable); and	you are personally liable); and
Solid process of the second se	

axceeded \$10,000. Raport liabilitias of over \$10,000 owed to any one creditor at any time during period. New Membars: Members are required to report all liabilities secur (unlass you rent it out or are a Member); loans secured by automobiles, housahold furniture, or appliances; liabilitias of a businass in which you own an interest (unlass you are parsonally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if tha balance at tha close of tha reporting pariod *Column K is for liabilities hald solely by your spouse or dependent child

		SP. DC. JT		
Utah E	Example			
Utah First Credit Union, Utah Utah First Credit Union, Utah	First Bank of Wilmington, DE	Creditor		
4/16	5/98	Liability Incurred MO/YR	,	
Mort on Rental Prop. SLC, UT Nort. on Rental Prop. SLC, UT	Mortgage on Rental Property, Dover, DE	Type of Liability		
		\$10,001- \$15,000	>	
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××		\$1,000,001- \$5,000,000	G	Amount of Liability
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		Over \$50,000,000	<u> </u>	

SCHEDULE E - POSITIONS

Raport all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, rapresentative, amployee, or consultant of any corporation, firm, partnership, or other business anterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any raligious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Mambars and second-year candidates report positions held in the raporting period and the current calandar year. First-yaar candidates and new amployeas report positions hald in the current calandar year and two previous yaars.

Position	Name of Organization
Trustee	The Benjamin Foundation uncompensated
Trustee	
President	zel Uncon
Trustee	Unco
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SCHEDULE F - AGREEMENTS

any egreement or arrangement that you	
of any egreement or arrangement that you have with respect to: future employment; e leave of absence during the period of govern	Name:
ence during the period of government service;	Pageof

Date	Parties to Agreement	Terms of Agreement
į		

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

			Example: Doe Jones & Smith, Hometown, Homestate	Source (Name and City/State)
			Accounting Services	Brief Description of Duties